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CONFIRMATION NO. 3158

|   |   |                             |   |  |                         |
|---|---|-----------------------------|---|--|-------------------------|
| <b>SERIAL NUMBER</b><br>10/524,840  | <b>FILING OR 371(c) DATE</b><br>02/17/2005<br><b>RULE</b>   | <b>CLASS</b><br>428         | <b>GROUP ART UNIT</b><br>1709   | <b>ATTORNEY DOCKET NO.</b><br>264826US0PCT |                         |
| <b>APPLICANTS</b><br>Hans Lorenz, Darmstadt, GERMANY;<br>Helmut Haering, Reichelsheim, GERMANY;<br>Volker Mende, Darmstadt, GERMANY;<br>Christoph Krohmer, Stockstadt, GERMANY;<br>Werner Hoess, Griesheim, GERMANY;  |   |                             |   |  |                         |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP04/04202 04/21/2004<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 103 29 938.6 07/02/2003  |   |                             |   |  |                         |
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance<br>Verified and Acknowledged |   | STATE OR COUNTRY<br>GERMANY | SHEETS DRAWING<br>0   | TOTAL CLAIMS<br>17                         | INDEPENDENT CLAIMS<br>1 |
| <b>ADDRESS</b><br>22850   |   |                             |   |  |                         |
| <b>TITLE</b><br>Plastic body provided with a microstructured surface  |   |                             |   |  |                         |
| <b>FILING FEE RECEIVED</b><br>900   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                             | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                         |